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Application Number 09/669,477

Filing Date 09/25/2000

First Named Inventor Peter Michael Murphy

Group Art Unit 1771

Examiner Name

Attorney Docket Number CH2751 US NA

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	Lucas K. Shay			34,724				
	Kathryn M. Sanchez			43,081				
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Assignee of record of the entire interest. See 37 CFR 3.71.								
Certific	cate under 37 CFR 3.73(b) is		•					
	SI	GNATURE of Applica	nt or As	ssignee of Record	<del></del>			
Name	Peter Michael Murphy							
Signature	Poli	Pote Muchael Much						
Date	natures of all the inventors or assignees of record of the entire interest or their representative(s) are required.							
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Examiner Name

Attorney Docket Number CH2751 US NA

1 hereby appo	oint:				-			
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	Lucas K. Shay				34,724			
	Kathryn M. Sanchez				43,081			
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	T		NATURE of Applica	ant or As	signee of Record			
Name	<del>  /&gt; .</del>	Prentice Lee Huffines						
Signature	wind our Dupp es							
	Date 14 DEC 00 PD NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.							
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First Named Inventor Peter Michael Murphy
Group Art Unit 1771

Examiner Name

Attorney Docket Number CH2751 US NA

Attorney Docket Number hereby appoint: Practitioners at Customer Number 23906 Practitioner(s) named below: Registration Number Name 29,190 Nancy S. Mayer 34,724 Lucas K. Shay Kathryn M. Sanchez 43,081 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith Please change the correspondence address for the above-identified application to: OR Firm or Individual Name Address Address ZIP State City Country Fax Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name James Thomas Summers Signature NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\* \*Total of three forms are submitted

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